

Newmarket Fire & Rescue

4 Young Lane ~ Newmarket, NH 03857 ~ (603) 659-3334
www.NewmarketFire.com

Membership Application

Date: _____ Which area of the Fire & Rescue are you interested in? ☐ Fire ☐ EMS ☐ Both

Personal Information

Name: _____ SSN: _____ - _____ - _____

Address: _____ Town: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ DOB: _____

Email address: _____ DL #: _____ State: _____

Length at present address: _____ Marital Status: ☐ Single ☐ Married - spouses name: _____

Present Employer: _____ Phone: _____

Length of employment: _____ Hours: _____ Days off: _____

Are you a student? _____ Do you live on campus? _____ If not what town? _____

Do you have a criminal record or adverse driving record? ☐ No ☐ Yes (describe briefly on back of application)

Experience and Certification

Do you have any Firefighting or EMS experience? ☐ Yes ☐ No Are you Certified? ☐ No ☐ Yes State: _____

If Certified, at what level? ☐ FFI ☐ FFII ☐ FFIII ☐ FR ☐ EMT-B ☐ EMT-I ☐ EMT-P ☐ OTHER _____

Have you ever been a member of a Fire & Rescue Service? ☐ No ☐ Yes – with: _____

References

Please list three references not related to you:

Name

Address

Phone

_____	_____	_____
_____	_____	_____
_____	_____	_____

Failure to honestly answer any question above may be cause for denial or termination of membership.
All members are subject to the rules and regulations of the Town of Newmarket.

Signature of Applicant